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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT: HIBACHI EXPRESS OF LARGO INC.

Name of Corporation

DOCUMENT NUMBER: P19000035072

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

CARRIE ZHONG

Name of Contact Person

CLS BUSINESS CENTER INC.

Firm/Company

2 ALLEN ST UNIT 4G

Address

NEW YORK, NY 10002

City/State and Zip Code

CLSNYC3@MAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

CARRIE ZHONG

,212

925-8366

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	unge is submitted for a corpor	2, 617.0502, 607.1508, or 617.1508, I ition organized under the laws of the S e or registered agent, or both, in the S	State of Florida
	the corporation: Hibachi E		·
2. The principal Largo, FI	office address: 2104 E. B	ay Dr.	
3. The mailing a	address (if different): 2 Aller	St. Unit 4G	
4. Date of incor	poration/qualification: 04/19	Document number:	P19000035072
5. The name and		registered agent and registered office of	
	Meie Zheng		
	2240 E. Bay Dr.		
	Largo, FL 33771		
6. The name and (if changed):	d street address of the new reg	istered agent (if changed) and /or regis	stered office SECRETA
	2104 E. Bay Dr.		SSET O
	Largo, FL 33771	P.O. Box NOT acceptable	PH 2: 42 OF STATE E.FLORID
The street addr as changed will	ess of its registered office and be identical.	the street address of the business off	ice of its registered agent
authorized by t	he board, or the corporation h	lly adopted by its board of directors of as been notified in writing of the char	or by an officer so nge.
Ne	ie Zheng ure of an officer or director	Meie Zheng	
I haraby accent	t the appointment as registere	d agent and agree to act in this capac of all statutes relative to the proper with and accept the obligation of my rely to reflect a change in the registe i notified in writing of this change.	city
		07/29/2019	
Sig	gnature of Registered Agent	Date	
If signing on bo	chalf of an entity:		
	Typed or Printed Name	<u> </u>	

Make checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *

CR2E045 (03/12)